

POSITION	INITIALS	ID NO.	DATE
<b>FEES DETERMINATION</b>	VR		09/12/01
<b>O.I.P.E. CLASSIFIER</b>		49	5/7/01
<b>FORMALITY REVIEW</b>	KCL	JCS/703	05/15/01
<b>RESPONSE FORMALITY REVIEW</b>	M.H	CMSS	09-20-01

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 — (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

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If more than 150 claims or 10 actions  
staple additional sheet here

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JCS 5/12/01

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